PAGE 1 / 56

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

'	or other man An Aut	nonzea committee	Office Use Only
NAME OF COMMITTEE (in full)	TYPE OR PRINT ▼	Example: If typing, type over the lines.	12FE4M5
American Academy of	Physician Assistants	Political Action Comm	ittee (PA PAC)
ADDRESS (number and street)	2318 Mill Road		
▼ Check if different	Suite 1300		
than previously reported. (ACC)	Alexandria		VA 22314
2. FEC IDENTIFICATION NU	MBER ▼ CIT	TY A	STATE ▲ ZIP CODE ▲
C C00122499		S THIS NEW (N) OF	AMENDED (A)
4. TYPE OF REPORT (Choose One)	Report Due On:	20 (M2) May 20 (M	(Non-Election Year Only)
(a) Quarterly Reports:		20 (M3) Jun 20 (M	(Non-Election Year Only)
April 15		20 (M4) Jul 20 (M7	Oct 20 (M10) Jan 31 (YE)
Quarterly Report (Q July 15	(C) 12-Day	Primary (12P)	General (12G) Runoff (12R)
Quarterly Report (Q. October 15	Report for the:	Convention (12C)	Special (12S)
Quarterly Report (Q January 31 Year-End Report (Yi	Floatic	on on	in the State of
July 31 Mid-Year Report (Non-election Year Only) (MY)	(d) 30-Day	General (30G)	Runoff (30R) Special (30S)
Termination Report (TER)	Election	on on	in the State of
5. Covering Period 07	01 2017	through 12	M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
I certify that I have examined thi	s Report and to the best of DORN, JENNIFER, , Ms.,	my knowledge and belief it is	true, correct and complete.
Type or Print Name of Treasurer			
Signature of Treasurer	N, JENNIFER, , Ms.,	[Electronically Filed]	Date 01 / 26 / 2018
NOTE: Submission of false, errone	eous, or incomplete informatio	n may subject the person signing	g this Report to the penalties of 52 U.S.C. § 30109.
Office Use			FEC FORM 3X Rev. 05/2016

SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 05/2016) Page 2

Write or Type Committee Name

American Academy of Physician Assistants Political Action Committee (PA PAC)

07 01 2017 12 31 2017 Report Covering the Period: From: To: **COLUMN A COLUMN B** This Period Calendar Year-to-Date (a) Cash on Hand 90233.64 January 1. 2017 (b) Cash on Hand at 135326.34 Beginning of Reporting Period..... 31168.08 108105.38 Total Receipts (from Line 19) (d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 198339.02 166494.42 6(a) and 6(c) for Column B)..... 34119.90 65964.50 Total Disbursements (from Line 31)...... Cash on Hand at Close of 8. Reporting Period 132374.52 132374.52 (subtract Line 7 from Line 6(d))..... Debts and Obligations Owed TO the Committee (Itemize all on 0.00 Schedule C and/or Schedule D) 10. Debts and Obligations Owed BY the Committee (Itemize all on 0.00 Schedule C and/or Schedule D)

For further information contact:

This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

Federal Election Commission 999 E Street, NW Washington, DC 20463

Toll Free 800-424-9530 Local 202-694-1100

DETAILED SUMMARY PAGE

of Receipts

FEC Form 3X (Rev. 05/2016)

Write or Type Committee Name

American Academy of Physician Assistants Political Action Committee (PA PAC)

01 2017 31 2017 12 Report Covering the Period: From: To: **COLUMN A COLUMN B** I. Receipts **Total This Period** Calendar Year-to-Date 11. Contributions (other than loans) From: (a) Individuals/Persons Other Than Political Committees 6622.00 23418.50 (i) Itemized (use Schedule A)..... 24546.08 84686.88 (ii) Unitemized (iii) TOTAL (add 108105.38 31168.08 Lines 11(a)(i) and (ii).....▶ 0.00 0.00 (b) Political Party Committees (c) Other Political Committees 0.00 0.00 (such as PACs)..... (d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry 108105.38 31168.08 Totals to Line 33, page 5)▶ 12. Transfers From Affiliated/Other 0.00 0.00 Party Committees..... 0.00 0.00 13. All Loans Received..... 0.00 0.00 14. Loan Repayments Received..... 15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) 0.00 0.00 (Carry Totals to Line 37, page 5)..... 16. Refunds of Contributions Made to Federal Candidates and Other 0.00 0.00 Political Committees..... 17. Other Federal Receipts 0.00 (Dividends, Interest, etc.)..... 0.00 18. Transfers from Non-Federal and Levin Funds (a) Non-Federal Account 0.00 (from Schedule H3)..... 0.00 0.00 0.00 (b) Levin Funds (from Schedule H5) (c) Total Transfers (add 18(a) and 18(b)).. 0.00 0.00 19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))....... 108105.38 31168.08 20. Total Federal Receipts 31168.08 108105.38 (subtract Line 18(c) from Line 19)▶

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 05/2016)

Page 4

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
Operating Expenditures: (a) Allocated Federal/Non-Federal Activity (from Schedule H4)		Janoniaa. Tour to Suite
(i) Federal Share	0.00	0.00
(ii) Non-Federal Share	0.00	0.00
(b) Other Federal Operating		
Expenditures(c) Total Operating Expenditures	759.90	2404.50
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))▶	759.90	2404.50
Transfers to Affiliated/Other Party	0.00	0.00
Committees Contributions to Federal Candidates/Committees	0.00	0.00
and Other Political Committees	33000.00	63000.00
Independent Expenditures (use Schedule E)	0.00	0.00
Coordinated Party Expenditures (52 U.S.C. § 30116(d))		4 1 4 1 4 1 4
(use Schedule F)	0.00	0.00
Loan Repayments Made	0.00	0.00
Loans Made	0.00	0.00
Refunds of Contributions To: (a) Individuals/Persons Other Than Political Committees	360.00	560.00
	300.00	300.00
(b) Political Party Committees	0.00	0.00
(such as PACs)	0.00	0.00
(d) Total Contribution Refunds		
(add Lines 28(a), (b), and (c))	360.00	560.00
Other Disbursements (Including		
Non-Federal Donations)	0.00	0.00
Federal Election Activity (52 U.S.C. § 30101(20 (a) Allocated Federal Election Activity (from Schedule H6)	0))	
(i) Federal Share	0.00	0.00
(ii) "Levin" Share	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add	0.00	0.00
Lines 30(a)(i), 30(a)(ii) and 30(b))	0.00	0.00
Total Disbursements (add Lines 21(c), 22,		
23, 24, 25, 26, 27, 28(d), 29 and 30(c))	34119.90	65964.50
Total Federal Disbursements		
(subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31)	24440.00	
	34119.90	65964.50

DETAILED SUMMARY PAGE

of Disbursements

	III. Net Contributions/ Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33.	Total Contributions (other than loans) (from Line 11(d), page 3)	31168.08	108105.38
34.	(from Line 28(d))	360.00	560.00
35.	Net Contributions (other than loans) (subtract Line 34 from Line 33)	30808.08	107545.38
36.	Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))▶	759.90	2404.50
37.	Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
38.	Net Operating Expenditures (subtract Line 37 from Line 36)	759.90	2404.50

Use separate schedule(s) for each category of the Detailed Summary Page

F	OR	LINE	NU	MBER	:	PAGE		6	OF		56
(0	(check only one)										
	X	11a		11b		11c		12			
		13		14		15		16	;		17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) American Academy of Physician Assistants Political Action Committee (PA PAC) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Butterfield Vickery, Kristin, , , Date of Receipt Mailing Address 8713 Gateshead Rd 2017 City Zip Code State Transaction ID: A73320652487E41ED830 VA Alexandria 22309-4020 Amount of Each Receipt this Period FEC ID number of contributing 31.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) **AAPA** Receipt For: Aggregate Year-to-Date ▼ Primary General 237.50 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name **B.** Butterfield Vickery, Kristin, , , Date of Receipt Mailing Address 8713 Gateshead Rd 2017 City State Zip Code Transaction ID: A919D3D20785041BEBC0 VA Alexandria 22309-4020 Amount of Each Receipt this Period FEC ID number of contributing 31.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) **AAPA** Staff Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) ▼ 268.50 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name **c.** Butterfield Vickery, Kristin, , , Date of Receipt Mailing Address 8713 Gateshead Rd 2017 City Zip Code State Transaction ID: AD495F6A45E7B42C19E3 Alexandria VA 22309-4020 Amount of Each Receipt this Period FEC ID number of contributing 31.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) AAPA Staff Receipt For: Aggregate Year-to-Date ▼ Primary General 299.50 Other (specify) 93.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

FOR LINE NUMBER: **PAGE** Use separate schedule(s) (check only one) **X** 11a 11b 11c

7 OF

for each category of the 12 Detailed Summary Page 13 14 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) American Academy of Physician Assistants Political Action Committee (PA PAC) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Butterfield Vickery, Kristin, , , Date of Receipt Mailing Address 8713 Gateshead Rd 2017 City Zip Code State Transaction ID: AACD5D58845B347B79AD VA Alexandria 22309-4020 Amount of Each Receipt this Period FEC ID number of contributing 31.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) **AAPA** Receipt For: Aggregate Year-to-Date ▼ Primary General 330.50 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name **B.** Butterfield Vickery, Kristin, , , Date of Receipt Mailing Address 8713 Gateshead Rd 2017 City State Zip Code Transaction ID: A8DEEDEF51AB2476284F VA Alexandria 22309-4020 Amount of Each Receipt this Period FEC ID number of contributing 31.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) **AAPA** Staff Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) ▼ 361.50 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name **c.** Butterfield Vickery, Kristin, , , Date of Receipt Mailing Address 8713 Gateshead Rd 14 2017 City Zip Code State Transaction ID: AE7F9FBEA3D7F431ABC7 Alexandria VA 22309-4020 Amount of Each Receipt this Period FEC ID number of contributing 50.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) AAPA Staff Receipt For: Aggregate Year-to-Date ▼ Primary General 411.50 Other (specify) 112.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

Use separate schedule(s) for each category of the

F	OR	LINE	NU	MBER	:	PAGE		8	OF		56
(0	(check only one)										
	X	11a		11b		11c		12			
		13		14		15		16			17

Detailed Summary Page Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) American Academy of Physician Assistants Political Action Committee (PA PAC) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Butterfield Vickery, Kristin, , , Date of Receipt Mailing Address 8713 Gateshead Rd 2017 City Zip Code State Transaction ID: A8C9BF0B80C544796B6C VA Alexandria 22309-4020 Amount of Each Receipt this Period FEC ID number of contributing 46.50 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) **AAPA** Receipt For: Aggregate Year-to-Date ▼ Primary General 458.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Curtis, L., Gail, , PA-C Date of Receipt Mailing Address Medical Center Blvd 10 2017 Dept OF City State Zip Code Transaction ID: AC8F136F639BB42CCB10 NC Winston Salem 00001 Amount of Each Receipt this Period FEC ID number of contributing 100.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Wake Forest Univ Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) 600.00 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name c. Curtis, L., Gail, , PA-C Date of Receipt Mailing Address Medical Center Blvd 14 2017 Dept OF City State Zip Code Transaction ID: A8EA7601DC3CA48E29F9 NC Winston Salem 00001 Amount of Each Receipt this Period FEC ID number of contributing 250.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Wake Forest Univ Receipt For: Aggregate Year-to-Date ▼ Primary General 850.00 Other (specify) 396.50 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

Use separate schedule(s) for each category of the Detailed Summary Page

F	OR	LINE	NU	MBER	:	PAGE		9	OF		56
(0	(check only one)										
	X	11a		11b		11c		12			
		13		14		15		16	;		17

Detailed Summary Page Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) American Academy of Physician Assistants Political Action Committee (PA PAC) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Dobbs, Lauren, Grace, , PA-C Date of Receipt Mailing Address 171 Bearclaw Cir 2017 City Zip Code State Transaction ID: A29FD219DB9CE4B2A99C TX Aledo 76008-1245 Amount of Each Receipt this Period FEC ID number of contributing C 41.75 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) **UNT HSC PEDIATRICS** Receipt For: Aggregate Year-to-Date ▼ Primary General 208.75 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Dobbs, Lauren, Grace, , PA-C Date of Receipt Mailing Address 171 Bearclaw Cir 2017 City State Zip Code Transaction ID: AA7C691A9B88243F2AF8 TX Aledo 76008-1245 Amount of Each Receipt this Period FEC ID number of contributing 41.75 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) UNT HSC PEDIÁTRICS Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) 250.50 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name c. Dobbs, Lauren, Grace, , PA-C Date of Receipt Mailing Address 171 Bearclaw Cir 20 2017 City State Zip Code Transaction ID: A02F0BF3EDF2F4159874 TX Aledo 76008-1245 Amount of Each Receipt this Period FEC ID number of contributing 41.75 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) **UNT HSC PEDIATRICS** Receipt For: Aggregate Year-to-Date ▼ Primary General 292.25 Other (specify) 125.25 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

FOR LINE NUMBER: PAGE 10 OF Use separate schedule(s) (check only one) for each category of the **X** 11a 11b 11c 12

Detailed Summary Page 13 14 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) American Academy of Physician Assistants Political Action Committee (PA PAC) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Dobbs, Lauren, Grace, , PA-C Date of Receipt Mailing Address 171 Bearclaw Cir 2017 City Zip Code State Transaction ID: AD1FA72599C3346BF985 TX Aledo 76008-1245 Amount of Each Receipt this Period FEC ID number of contributing C 41.75 federal political committee. Name of Employer (for Individual) Memo Item Occupation (for Individual) **UNT HSC PEDIATRICS** Receipt For: Aggregate Year-to-Date ▼ Primary General 334.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Dobbs, Lauren, Grace, , PA-C Date of Receipt Mailing Address 171 Bearclaw Cir 2017 City State Zip Code Transaction ID: AE63E6B9441C0454692D TX Aledo 76008-1245 Amount of Each Receipt this Period FEC ID number of contributing 41.75 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) UNT HSC PEDIÁTRICS Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) 375.75 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name c. Dobbs, Lauren, Grace, , PA-C Date of Receipt Mailing Address 171 Bearclaw Cir 20 2017 City State Zip Code Transaction ID: ADC3F828C14AA46D197D TX Aledo 76008-1245 Amount of Each Receipt this Period FEC ID number of contributing C 41.75 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) **UNT HSC PEDIATRICS** Receipt For: Aggregate Year-to-Date ▼ Primary General 417.50 Other (specify) 125.25 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only)..... 7

Use separate schedule(s) for each category of the Detailed Summary Page

F	OR	LINE	NU	IMBER	:	PAGE	•	11	OF		56	
(0	(check only one)											
	X	11a	11c		12							
		13		14		15		16			17	

Detailed Summary Page Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) American Academy of Physician Assistants Political Action Committee (PA PAC) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name DORN, JENNIFER, , , Date of Receipt Mailing Address 2318 Mill Rd Ste 1300 2017 City Zip Code State Transaction ID: AFFDEE366FF5C4A4CBB5 VA Alexandria 22314-6868 Amount of Each Receipt this Period FEC ID number of contributing 50.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) CEO American Academy of Physician Assistan Receipt For: Aggregate Year-to-Date ▼ Primary General 375.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. DORN, JENNIFER, , , Date of Receipt Mailing Address 2318 Mill Rd 2017 Ste 1300 City State Zip Code Transaction ID: A17BAD4C1BB124014A47 VA Alexandria 22314-6868 Amount of Each Receipt this Period FEC ID number of contributing 50.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) American Academy of Physician Assistan CEO Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) 425.00 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name c. DORN, JENNIFER, , , Date of Receipt Mailing Address 2318 Mill Rd 2017 Ste 1300 City Zip Code State Transaction ID: A57B0EE615FF54437B52 VAAlexandria 22314-6868 Amount of Each Receipt this Period FEC ID number of contributing 50.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) American Academy of Physician Assistan CEO Receipt For: Aggregate Year-to-Date ▼ Primary General 475.00 Other (specify) 150.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

FOR LINE NUMBER: PAGE 12 OF Use separate schedule(s) (check only one) **X** 11a 11b 11c 12

for each category of the Detailed Summary Page 13 14 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) American Academy of Physician Assistants Political Action Committee (PA PAC) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name DORN, JENNIFER, , , Date of Receipt Mailing Address 2318 Mill Rd Ste 1300 2017 City Zip Code State Transaction ID : A68FB62A4797248EE966 VA Alexandria 22314-6868 Amount of Each Receipt this Period FEC ID number of contributing 50.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) CEO American Academy of Physician Assistan Receipt For: Aggregate Year-to-Date ▼ Primary General 525.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. DORN, JENNIFER, , , Date of Receipt Mailing Address 2318 Mill Rd 2017 Ste 1300 City State Zip Code Transaction ID: A97F6C7D61BF34E909C8 VA Alexandria 22314-6868 Amount of Each Receipt this Period FEC ID number of contributing 50.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) American Academy of Physician Assistan CEO Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) 575.00 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name c. DORN, JENNIFER, , , Date of Receipt Mailing Address 2318 Mill Rd 29 2017 Ste 1300 City Zip Code State Transaction ID: A0E6B9705AA854F76BB3 VAAlexandria 22314-6868 Amount of Each Receipt this Period FEC ID number of contributing 75.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) American Academy of Physician Assistan CEO Receipt For: Aggregate Year-to-Date ▼ Primary General 650.00 Other (specify) 175.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only)..... 7

FOR LINE NUMBER: PAGE 13 OF Use separate schedule(s) (check only one) for each category of the **X** 11a 11b 11c 12

Detailed Summary Page 13 14 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) American Academy of Physician Assistants Political Action Committee (PA PAC) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Dougherty, Patrick, , , Date of Receipt Mailing Address 2421 Cumberland St 2017 City Zip Code State Transaction ID: AE6C2AFA2D978463687A MI Kalamazoo 49006-1378 Amount of Each Receipt this Period FEC ID number of contributing 25.00 federal political committee. Name of Employer (for Individual) Memo Item Occupation (for Individual) Southwestern Michigan Emergency Servic Receipt For: Aggregate Year-to-Date ▼ Primary General 225.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name **B.** Dougherty, Patrick, , , Date of Receipt Mailing Address 2421 Cumberland St 10 2017 City State Zip Code Transaction ID : A8DF4573989B543929B7 MI Kalamazoo 49006-1378 Amount of Each Receipt this Period FEC ID number of contributing 25.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Southwestern Michigan Emergency Servic Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) 250.00 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name **c.** Dougherty, Patrick, , , Date of Receipt Mailing Address 2421 Cumberland St 03 2017 City State Zip Code Transaction ID: ADBE31962C13D4C92982 MI Kalamazoo 49006-1378 Amount of Each Receipt this Period FEC ID number of contributing 25.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Southwestern Michigan Emergency Servic Receipt For: Aggregate Year-to-Date ▼ Primary General 275.00 Other (specify) 75.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only)..... 7

FOR LINE NUMBER: PAGE 14 OF Use separate schedule(s) (check only one) for each category of the **X** 11a 11b 11c

12 Detailed Summary Page 13 14 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) American Academy of Physician Assistants Political Action Committee (PA PAC) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Fowler, Tillie, , , Date of Receipt Mailing Address 2318 Mill Rd Ste 1300 2017 City Zip Code State Transaction ID: AA0801CB4CE8F4A329FD VA Alexandria 22314-6868 Amount of Each Receipt this Period FEC ID number of contributing 40.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) AAPA Staff American Academy of Physician Assistan Receipt For: Aggregate Year-to-Date ▼ Primary General 300.00 Other (specify) ▼ Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Fowler, Tillie, , , Date of Receipt Mailing Address 2318 Mill Rd 2017 Ste 1300 City State Zip Code Transaction ID: AD103EFFD538C42C89A6 VA Alexandria 22314-6868 Amount of Each Receipt this Period FEC ID number of contributing 40.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) American Academy of Physician Assistan AAPA Staff Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) 340.00 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name **c.** Fowler, Tillie, , , Date of Receipt Mailing Address 2318 Mill Rd 22 2017 Ste 1300 City Zip Code State Transaction ID: AD8B056E052AB412A86F VAAlexandria 22314-6868 Amount of Each Receipt this Period FEC ID number of contributing 40.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) American Academy of Physician Assistan AAPA Staff Receipt For: Aggregate Year-to-Date ▼ Primary General 380.00 Other (specify) 120.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only)..... 7

FOR LINE NUMBER: PAGE 15 OF Use separate schedule(s) (check only one) for each category of the **X** 11a 11b 11c 12

Detailed Summary Page 13 14 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) American Academy of Physician Assistants Political Action Committee (PA PAC) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Fowler, Tillie, , , Date of Receipt Mailing Address 2318 Mill Rd Ste 1300 2017 City Zip Code State Transaction ID: A7F3C8AC9D0FD4F119DB VA Alexandria 22314-6868 Amount of Each Receipt this Period FEC ID number of contributing 40.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) AAPA Staff American Academy of Physician Assistan Receipt For: Aggregate Year-to-Date ▼ Primary General 420.00 Other (specify) ▼ Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Fowler, Tillie, , , Date of Receipt Mailing Address 2318 Mill Rd 2017 Ste 1300 City State Zip Code Transaction ID: A415C730EB9674D5BB4F VA Alexandria 22314-6868 Amount of Each Receipt this Period FEC ID number of contributing 40.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) American Academy of Physician Assistan AAPA Staff Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) 460.00 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name **c.** Fowler, Tillie, , , Date of Receipt Mailing Address 2318 Mill Rd 29 2017 Ste 1300 City Zip Code State Transaction ID: A9E0836C9CF7F4B98B50 VAAlexandria 22314-6868 Amount of Each Receipt this Period FEC ID number of contributing 60.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) American Academy of Physician Assistan AAPA Staff Receipt For: Aggregate Year-to-Date ▼ Primary General 520.00 Other (specify) 140.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only)..... 7

FOR LINE NUMBER: PAGE 16 OF Use separate schedule(s) (check only one) for each category of the **X** 11a 11b 11c 12

Detailed Summary Page 13 14 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) American Academy of Physician Assistants Political Action Committee (PA PAC) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Gables, Lisa, , , Date of Receipt Mailing Address 12701 Mill Glen Ct Ste 1300 2017 City Zip Code State Transaction ID: AAC9FB5ECFF8749A09D6 VA Clifton 20124-2040 Amount of Each Receipt this Period FEC ID number of contributing 100.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) **AAPA** Chief Development Officer Receipt For: Aggregate Year-to-Date ▼ Primary General 900.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. GAHRES, CATHERINE, , , Date of Receipt Mailing Address 2318 Mill Rd 10 2017 Ste 1300 City State Zip Code Transaction ID: A92341A5EB39A4F47BB1 VA Alexandria 22314-6868 Amount of Each Receipt this Period FEC ID number of contributing 20.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) American Academy of Physician Assistan Staff Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) 210.00 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name c. GAHRES, CATHERINE, , , Date of Receipt Mailing Address 2318 Mill Rd 2017 Ste 1300 City Zip Code State Transaction ID: AC4421B0E75F848DCAD7 VAAlexandria 22314-6868 Amount of Each Receipt this Period FEC ID number of contributing 20.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) American Academy of Physician Assistan Staff Receipt For: Aggregate Year-to-Date ▼ Primary General 230.00 Other (specify) 140.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only)..... 7

FOR LINE NUMBER: PAGE 17 OF Use separate schedule(s) (check only one) for each category of the **X** 11a 11b 11c 12

Detailed Summary Page 13 14 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) American Academy of Physician Assistants Political Action Committee (PA PAC) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name GAHRES, CATHERINE, , , Date of Receipt Mailing Address 2318 Mill Rd Ste 1300 2017 City Zip Code State Transaction ID: A82E41671FCF44025981 VA Alexandria 22314-6868 Amount of Each Receipt this Period FEC ID number of contributing 30.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) American Academy of Physician Assistan Receipt For: Aggregate Year-to-Date ▼ Primary General 260.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Heuer, William, Tate, , Date of Receipt Mailing Address 2318 Mill Road 2017 **Suite 1300** City State Zip Code Transaction ID: AE3D5E9B196CE4046A87 VA Alexandria 22314-6868 Amount of Each Receipt this Period FEC ID number of contributing 80.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) **AAPA** Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) ▼ 520.00 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name c. Heuer, William, Tate, , Date of Receipt Mailing Address 2318 Mill Road 25 2017 Suite 1300 City Zip Code State Transaction ID: AA567EEE0130B4DC383F VAAlexandria 22314-6868 Amount of Each Receipt this Period FEC ID number of contributing 80.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) AAPA Receipt For: Aggregate Year-to-Date ▼ Primary General 600.00 Other (specify) 190.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

FOR LINE NUMBER: PAGE 18 OF Use separate schedule(s) (check only one) **X** 11a 11b 11c 12

for each category of the Detailed Summary Page 13 14 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) American Academy of Physician Assistants Political Action Committee (PA PAC) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Heuer, William, Tate, , Date of Receipt Mailing Address 2318 Mill Road **Suite 1300** 2017 City Zip Code State Transaction ID: A067AC475C1474F668F7 VA Alexandria 22314-6868 Amount of Each Receipt this Period FEC ID number of contributing 80.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) **AAPA** Receipt For: Aggregate Year-to-Date ▼ Primary General 680.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Heuer, William, Tate, , Date of Receipt Mailing Address 2318 Mill Road 10 2017 **Suite 1300** City State Zip Code Transaction ID: AE9DC38D152E34FD6859 VA Alexandria 22314-6868 Amount of Each Receipt this Period FEC ID number of contributing 80.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) **AAPA** Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) 760.00 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name c. Heuer, William, Tate, , Date of Receipt Mailing Address 2318 Mill Road 2017 Suite 1300 City Zip Code State Transaction ID : A08D9667B5AA3423E870 VAAlexandria 22314-6868 Amount of Each Receipt this Period FEC ID number of contributing 80.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) AAPA Receipt For: Aggregate Year-to-Date ▼ Primary General 840.00 Other (specify) 240.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

Use separate schedule(s) for each category of the

FO	R LINE	NUMBER	: PAGE	: 19 OF	56							
(ch	(check only one)											
	11a	11b	11c	12								
	13	14	15	16	17							

Detailed Summary Page Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) American Academy of Physician Assistants Political Action Committee (PA PAC) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Heuer, William, Tate, , Date of Receipt Mailing Address 2318 Mill Road **Suite 1300** 2017 City Zip Code State Transaction ID: A72C36F48AE5D441B946 VA Alexandria 22314-6868 Amount of Each Receipt this Period FEC ID number of contributing 120.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) **AAPA** Receipt For: Aggregate Year-to-Date ▼ Primary General 960.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Kinney, Terry, , , Date of Receipt Mailing Address 2402 Kinsman ct E 2017 City State Zip Code Transaction ID: A06D78DC06C9247B4A5C WA Roy 98580-9802 Amount of Each Receipt this Period FEC ID number of contributing 50.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Franciscan Medical Group PA-C Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) 350.00 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name c. Kinney, Terry, , , Date of Receipt Mailing Address 2402 Kinsman ct E 2017 City Zip Code State Transaction ID : A7D99AC68B3464306862 WA Roy 98580-9802 Amount of Each Receipt this Period FEC ID number of contributing C 50.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Franciscan Medical Group PA-C Receipt For: Aggregate Year-to-Date ▼ Primary General 400.00 Other (specify) 220.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

FOR LINE NUMBER: PAGE 20 OF Use separate schedule(s) (check only one) for each category of the **X** 11a 11b 11c

12 Detailed Summary Page 13 14 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) American Academy of Physician Assistants Political Action Committee (PA PAC) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Kinney, Terry, , , Date of Receipt Mailing Address 2402 Kinsman ct E 2017 City Zip Code State Transaction ID: ACD0E9D57C44048E899B WA 98580-9802 Roy Amount of Each Receipt this Period FEC ID number of contributing C 50.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) PA-C Franciscan Medical Group Receipt For: Aggregate Year-to-Date ▼ Primary General 450.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Kinney, Terry, , , Date of Receipt Mailing Address 2402 Kinsman ct E 10 2017 City State Zip Code Transaction ID: AB6255814CD5D4D9AB68 WA Roy 98580-9802 Amount of Each Receipt this Period FEC ID number of contributing 50.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Franciscan Medical Group PA-C Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) 500.00 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name c. Kinney, Terry, , , Date of Receipt Mailing Address 2402 Kinsman ct E 2017 City Zip Code State Transaction ID: A8F0BDB9432344E54902 WA Roy 98580-9802 Amount of Each Receipt this Period FEC ID number of contributing C 50.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Franciscan Medical Group PA-C Receipt For: Aggregate Year-to-Date ▼ Primary General 550.00 Other (specify) 150.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

Use separate schedule(s) for each category of the

F	OR	LINE	NU	MBER	:	PAGE	2	21	OF		56	
(0	(check only one)											
	X	11a		11b		11c		12				
		13		14		15		16	;		17	

Detailed Summary Page Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) American Academy of Physician Assistants Political Action Committee (PA PAC) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Kinney, Terry, , , Date of Receipt Mailing Address 2402 Kinsman ct E 2017 City Zip Code State Transaction ID: A9E551DB360334972B03 WA 98580-9802 Roy Amount of Each Receipt this Period FEC ID number of contributing C 50.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) PA-C Franciscan Medical Group Receipt For: Aggregate Year-to-Date ▼ Primary General 600.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Manley, Gary, L.,, Date of Receipt Mailing Address 9336 Sienna Ridge Dr 2017 City State Zip Code Transaction ID : A0447540F076A41658FA NV Las Vegas 89117-7015 Amount of Each Receipt this Period FEC ID number of contributing 100.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Nevada Family Care Physician Assistant Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) 400.00 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name c. Manley, Gary, L., , Date of Receipt Mailing Address 9336 Sienna Ridge Dr 02 2017 City Zip Code State Transaction ID: AD9FBBD93F2C841C7816 NV Las Vegas 89117-7015 Amount of Each Receipt this Period FEC ID number of contributing 100.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Nevada Family Care Physician Assistant Receipt For: Aggregate Year-to-Date ▼ Primary General 500.00 Other (specify) 250.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

Use separate schedule(s) for each category of the

F	DR	LINE	NU	MBER	PAGE	2	22 OF	=	56			
(c	(check only one)											
	X 11a 11b					11c		12				
		13		14		15		16		17		

Detailed Summary Page Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) American Academy of Physician Assistants Political Action Committee (PA PAC) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Manley, Gary, L., , Date of Receipt Mailing Address 9336 Sienna Ridge Dr 2017 City Zip Code State Transaction ID: A61BEBA5AA1B94BF6BFI NV Las Vegas 89117-7015 Amount of Each Receipt this Period FEC ID number of contributing 100.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Nevada Family Care Physician Assistant Receipt For: Aggregate Year-to-Date ▼ Primary General 600.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Manley, Gary, L.,, Date of Receipt Mailing Address 9336 Sienna Ridge Dr 10 2017 City State Zip Code Transaction ID: A92128BE7ACF747BBABF NV Las Vegas 89117-7015 Amount of Each Receipt this Period FEC ID number of contributing 100.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Nevada Family Care Physician Assistant Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) 700.00 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name c. Manley, Gary, L., , Date of Receipt Mailing Address 9336 Sienna Ridge Dr 09 2017 City Zip Code State Transaction ID: A59B0C69B4B5C4746A4B NV Las Vegas 89117-7015 Amount of Each Receipt this Period FEC ID number of contributing 100.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Nevada Family Care Physician Assistant Receipt For: Aggregate Year-to-Date ▼ Primary General 800.00 Other (specify) 300.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

FOR LINE NUMBER: PAGE 23 OF Use separate schedule(s) (check only one) **X** 11a 11b 11c 12

for each category of the Detailed Summary Page 13 14 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) American Academy of Physician Assistants Political Action Committee (PA PAC) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Manley, Gary, L., , Date of Receipt Mailing Address 9336 Sienna Ridge Dr 2017 City Zip Code State Transaction ID: A3D627FF11AD8491AA5B NV Las Vegas 89117-7015 Amount of Each Receipt this Period FEC ID number of contributing C 100.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Nevada Family Care Physician Assistant Receipt For: Aggregate Year-to-Date ▼ Primary General 900.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Manley, Gary, L.,, Date of Receipt Mailing Address 9336 Sienna Ridge Dr 2017 City State Zip Code Transaction ID : A52544014A98C42F08E4 NV Las Vegas 89117-7015 Amount of Each Receipt this Period FEC ID number of contributing 100.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Nevada Family Care Physician Assistant Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) 1000.00 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name c. Manley, Gary, L., , Date of Receipt Mailing Address 9336 Sienna Ridge Dr 80 2017 City Zip Code State Transaction ID: AD1AEBA3311C4461280F NV Las Vegas 89117-7015 Amount of Each Receipt this Period FEC ID number of contributing C 100.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Nevada Family Care Physician Assistant Receipt For: Aggregate Year-to-Date ▼ Primary General 1100.00 Other (specify) 300.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only)..... 7

EOD LINE NUMBER: DAGE 24 OF Us for

	1 01	1 LIIIL	INO	WIDEN.	IAGL	- 4	24 01	00
e separate schedule(s)	(che	eck only	or	ne)				
each category of the tailed Summary Page	X	11a		11b	11c		12	
		13		14	15		16	17

De Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) American Academy of Physician Assistants Political Action Committee (PA PAC) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Masters, Vimi, , , Date of Receipt Mailing Address 2601 Oates Ln 2017 City Zip Code State Transaction ID: AB037A2B0FE2747119A5 TX 76006-2696 Arlington Amount of Each Receipt this Period FEC ID number of contributing 365.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Cure with Care Medical Receipt For: Aggregate Year-to-Date ▼ Primary General 365.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. McNamara, Clare, , , Date of Receipt Mailing Address 842 Lakewood Dr 2017 City State Zip Code Transaction ID: AA127DC56B04C400CB57 CA Sunnyvale 94089-2039 Amount of Each Receipt this Period FEC ID number of contributing 500.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Stanford University Physician Assistant Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) 500.00 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name c. Miller, Erika, , , Date of Receipt Mailing Address 3205 Grand Ave 28 2017 City State Zip Code Transaction ID: A8CE05A78F3DD45478F5 IΑ Des Moines 50312-4176 Amount of Each Receipt this Period FEC ID number of contributing 40.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) American Academy of Physician Assistan Staff Receipt For: Aggregate Year-to-Date ▼ Primary General 300.00 Other (specify) 905.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

FOR LINE NUMBER: PAGE (check only one) **X** 11a 11b 11c

25 OF Use separate schedule(s) for each category of the 12 Detailed Summary Page 13 14 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) American Academy of Physician Assistants Political Action Committee (PA PAC) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Miller, Erika, , , Date of Receipt Mailing Address 3205 Grand Ave 2017 City Zip Code State Transaction ID: A5D0F0300C1494E9AA8E IΑ Des Moines 50312-4176 Amount of Each Receipt this Period FEC ID number of contributing 40.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) American Academy of Physician Assistan Receipt For: Aggregate Year-to-Date ▼ Primary General 340.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Miller, Erika, , , Date of Receipt Mailing Address 3205 Grand Ave 2017 City State Zip Code Transaction ID: AC0C02785D522426EBD7 IΑ Des Moines 50312-4176 Amount of Each Receipt this Period FEC ID number of contributing 40.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) American Academy of Physician Assistan Staff Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) 380.00 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name c. Miller, Erika, , , Date of Receipt Mailing Address 3205 Grand Ave 20 2017 City State Zip Code Transaction ID : AD9993134544C40B7A6E IΑ Des Moines 50312-4176 Amount of Each Receipt this Period FEC ID number of contributing 40.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) American Academy of Physician Assistan Staff Receipt For: Aggregate Year-to-Date ▼ Primary General 420.00 Other (specify) 120.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only)..... 7

FOR LINE NUMBER: PAGE Use separate schedule(s) (check only one) **X** 11a 11b 11c

26 OF for each category of the 12 Detailed Summary Page 13 14 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) American Academy of Physician Assistants Political Action Committee (PA PAC) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Miller, Erika, , , Date of Receipt Mailing Address 3205 Grand Ave 2017 City Zip Code State Transaction ID: A952DDD8C529F4F5DB54 IΑ Des Moines 50312-4176 Amount of Each Receipt this Period FEC ID number of contributing 40.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) American Academy of Physician Assistan Receipt For: Aggregate Year-to-Date ▼ Primary General 460.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Miller, Erika, , , Date of Receipt Mailing Address 3205 Grand Ave 2017 City State Zip Code Transaction ID: AF4A168566F034EBFB67 IΑ Des Moines 50312-4176 Amount of Each Receipt this Period FEC ID number of contributing 60.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) American Academy of Physician Assistan Staff Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) 520.00 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name c. Mithoefer, James, P., , Date of Receipt Mailing Address 227 Sugar House Ln Stone Farm 2017 Corner Stone Farm City Zip Code State Transaction ID: AF2622ADCA487401DB42 VT Manchester Center 05255-4500 Amount of Each Receipt this Period FEC ID number of contributing 50.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) **Dartmouth Hitchock Medical Center** PA-C Receipt For: Aggregate Year-to-Date ▼ Primary General 250.00 Other (specify) 150.00 SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

FOR LINE NUMBER, DACE 27 OF Use separate schedule(s)

FOR LINE NUMBER.							FAGL	- 4		Oi		50
l	(check only one)											
	X 11a 11b						11c		12			
			13		14		15		16			17

for each category of the Detailed Summary Page Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) American Academy of Physician Assistants Political Action Committee (PA PAC) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Mittman, David, , , Date of Receipt Mailing Address 12334 Laguna Valley Ter 2017 Zip Code State Transaction ID: A47DE5CC30DDA4FFB8A(FL **Boynton Beach** 33473-5059 Amount of Each Receipt this Period FEC ID number of contributing 100.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Medical Publisher Clinician 1 Receipt For: Aggregate Year-to-Date ▼ Primary General 250.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Najera, Deanna, Bridge, Date of Receipt Mailing Address 46 Steed Ln 2017 City State Zip Code Transaction ID: A046414EA5DB1408FAD5 PA Hanover 17331-8021 Amount of Each Receipt this Period FEC ID number of contributing 25.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) **EMA** Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) 375.00 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name **c.** North, Jeanine, , , Date of Receipt Mailing Address 8206 Woodland Hills Dr 80 2017 City State Zip Code Transaction ID: A846297CD4E6D44659EC AL Semmes 36575-7489 Amount of Each Receipt this Period FEC ID number of contributing 500.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) South Alabama Family Medicine Receipt For: Aggregate Year-to-Date ▼ Primary General 500.00 Other (specify) 625.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

FOR LINE NUMBER: PAGE 28 OF Use separate schedule(s) (check only one) **X** 11a 11b 11c 12

for each category of the Detailed Summary Page 13 14 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) American Academy of Physician Assistants Political Action Committee (PA PAC) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Pagel, Josanne, K., , MPAS, PA-C Date of Receipt Mailing Address 35206 Chestnut Ridge Rd 2017 City Zip Code State Transaction ID: AFBC2DA47FACD4086890 OH North Ridgeville 44039-3916 Amount of Each Receipt this Period FEC ID number of contributing 100.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) The Cleveland Clinic Physician Assistant Receipt For: Aggregate Year-to-Date ▼ Primary General 600.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Parr, Sara, M.,, Date of Receipt Mailing Address 2510 NW 44th St 2017 City State Zip Code Transaction ID: A9FF6C67533EC46269EC OK Oklahoma City 73112-8328 Amount of Each Receipt this Period FEC ID number of contributing 50.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Oklahoma Arthritis Center Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) 300.00 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name c. PEER, ADAM, , , Date of Receipt Mailing Address 2318 Mill Rd 20 2017 Ste 1300 City Zip Code State Transaction ID: AD8F7F9630A024C6B963 VAAlexandria 22314-6868 Amount of Each Receipt this Period FEC ID number of contributing 20.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) American Academy of Physician Assistan Staff Receipt For: Aggregate Year-to-Date ▼ Primary General 210.00 Other (specify) 170.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only)..... 7

Use separate schedule(s)

ı	FOF	LINE	NU	MBER	PAGE	: 2	29 OF		56	
	(check only one)									
	X	11a		11b		11c		12		
		13		14		15		16		17

for each category of the Detailed Summary Page Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) American Academy of Physician Assistants Political Action Committee (PA PAC) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name PEER, ADAM, , , Date of Receipt Mailing Address 2318 Mill Rd Ste 1300 2017 City Zip Code State Transaction ID: A503BAFF9163645F1AF6 VA Alexandria 22314-6868 Amount of Each Receipt this Period FEC ID number of contributing 20.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) American Academy of Physician Assistan Receipt For: Aggregate Year-to-Date ▼ Primary General 230.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. PEER, ADAM, , , Date of Receipt Mailing Address 2318 Mill Rd 2017 Ste 1300 City State Zip Code Transaction ID: A7725E55EE2094896BA4 VA Alexandria 22314-6868 Amount of Each Receipt this Period FEC ID number of contributing 30.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) American Academy of Physician Assistan Staff Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) 260.00 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name **c.** Salahshor, Susan, , , Date of Receipt Mailing Address 175 Queen Victoria Ave 26 2017 City State Zip Code Transaction ID: AC7E31FCFF285404A816 FL Jacksonville 32259-5900 Amount of Each Receipt this Period FEC ID number of contributing 25.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Lead PA Mayo Clinic Receipt For: Aggregate Year-to-Date ▼ Primary General 275.00 Other (specify) 75.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

FOR LINE NUMBER: PAGE 30 OF Use separate schedule(s) (check only one) **X** 11a 11b 11c

for each category of the 12 Detailed Summary Page 13 14 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) American Academy of Physician Assistants Political Action Committee (PA PAC) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Salahshor, Susan, , , Date of Receipt Mailing Address 175 Queen Victoria Ave 2017 Zip Code State Transaction ID: AC0E1271EBDBA4A31958 FL Jacksonville 32259-5900 Amount of Each Receipt this Period FEC ID number of contributing 25.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Mavo Clinic Lead PA Receipt For: Aggregate Year-to-Date ▼ Primary General 300.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name **B.** Salahshor, Susan, , , Date of Receipt Mailing Address 175 Queen Victoria Ave 2017 City State Zip Code Transaction ID: A7BEF6EE353F24FD4BB1 FL Jacksonville 32259-5900 Amount of Each Receipt this Period FEC ID number of contributing 25.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Mayo Clinic Lead PA Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) 325.00 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name **c.** Salahshor, Susan, , , Date of Receipt Mailing Address 175 Queen Victoria Ave 26 2017 City State Zip Code Transaction ID: AFFE0603171A3414CA36 FL Jacksonville 32259-5900 Amount of Each Receipt this Period FEC ID number of contributing 25.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Lead PA Mayo Clinic Receipt For: Aggregate Year-to-Date ▼ Primary General 350.00 Other (specify) 75.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

TOTAL This Period (last page this line number only).....

FOR LINE NUMBER: PAGE 31 OF Use sena

rate schedule(s)	(check only one)										
category of the Summary Page		×	11a		11b		11c		12		
., ., .,			13		14		15		16		17
						,					

for each Detailed Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) American Academy of Physician Assistants Political Action Committee (PA PAC) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Salahshor, Susan, , , Date of Receipt Mailing Address 175 Queen Victoria Ave 2017 Zip Code State Transaction ID: A10E38DC52B70470587E FL Jacksonville 32259-5900 Amount of Each Receipt this Period FEC ID number of contributing 25.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Mavo Clinic Lead PA Receipt For: Aggregate Year-to-Date ▼ Primary General 375.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name **B.** Salahshor, Susan, , , Date of Receipt Mailing Address 175 Queen Victoria Ave 2017 City State Zip Code Transaction ID : A15E71618AEA24943961 Jacksonville FL 32259-5900 Amount of Each Receipt this Period FEC ID number of contributing 25.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Mayo Clinic Lead PA Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) 400.00 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name c. Schneider, Brenda, K., , Date of Receipt Mailing Address 306 Jasontown Rd 15 2017 City State Zip Code Transaction ID: A2F0ACFA67A3F40B4872 MD Westminster 21158-3548 Amount of Each Receipt this Period FEC ID number of contributing 25.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Westminster Dermatology Receipt For: Aggregate Year-to-Date ▼ Primary General 225.00 Other (specify) 75.00 SUBTOTAL of Receipts This Page (optional).....

Use separate schedule(s) for each category of the

F	OH	LINE	NU	MBER	PAGE	- 3	32	OF		90	
(check only one)											
`		1		1			1				
	X	11a		11b		11c		12			
		13		14		15		16			17
	1		ı	1		. ~	ı				

Detailed Summary Page Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) American Academy of Physician Assistants Political Action Committee (PA PAC) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Schneider, Brenda, K., , Date of Receipt Mailing Address 306 Jasontown Rd 2017 City Zip Code State Transaction ID: A8C69F28C6A024265BDB MD Westminster 21158-3548 Amount of Each Receipt this Period FEC ID number of contributing 25.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Westminster Dermatology Receipt For: Aggregate Year-to-Date ▼ Primary General 250.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name **B.** Shlifer, Inessa, , , Date of Receipt Mailing Address 461 Park Ave S 2017 FI7 City State Zip Code Transaction ID : A55E4C7322E1F45319E8 NY New York 10016-6822 Amount of Each Receipt this Period FEC ID number of contributing 100.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Park Ave Anesthetic Surgery Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) 700.00 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name **c.** Smith, Noel, , , Date of Receipt Mailing Address 2318 Mill Rd 2017 Ste 1300 City Zip Code State Transaction ID: A65F0ADCB732E44C0BD2 VAAlexandria 22314-6868 Amount of Each Receipt this Period FEC ID number of contributing 40.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) AAPA Researcher Receipt For: Aggregate Year-to-Date ▼ Primary General 300.00 Other (specify) 165.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

FOR LINE NUMBER: PAGE 33 OF Use separate schedule(s) (check only one) **X** 11a 11b 11c 12

for each category of the Detailed Summary Page 13 14 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) American Academy of Physician Assistants Political Action Committee (PA PAC) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Smith, Noel, , , Date of Receipt Mailing Address 2318 Mill Rd Ste 1300 2017 City Zip Code State Transaction ID: AE2E2A61DB7A745BD902 VA Alexandria 22314-6868 Amount of Each Receipt this Period FEC ID number of contributing 40.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) **AAPA** Researcher Receipt For: Aggregate Year-to-Date ▼ Primary General 340.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Smith, Noel, , , Date of Receipt Mailing Address 2318 Mill Rd 2017 Ste 1300 City State Zip Code Transaction ID: AB64E2C2F830D40BC9B9 VA Alexandria 22314-6868 Amount of Each Receipt this Period FEC ID number of contributing 40.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) **AAPA** Researcher Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) 380.00 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name **c.** Smith, Noel, , , Date of Receipt Mailing Address 2318 Mill Rd 20 2017 Ste 1300 City Zip Code State Transaction ID: A890FBD1E7459414EBA3 VAAlexandria 22314-6868 Amount of Each Receipt this Period FEC ID number of contributing 40.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) AAPA Researcher Receipt For: Aggregate Year-to-Date ▼ Primary General 420.00 Other (specify) 120.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

Use separate schedule(s) for each category of the

F	OR	LINE	NU	IMBER	PAGE	3	34 O	F	56	
((check only one)									
	X	11a		11b		11c		12		
		13		14		15		16		17

Detailed Summary Page Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) American Academy of Physician Assistants Political Action Committee (PA PAC) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Smith, Noel, , , Date of Receipt Mailing Address 2318 Mill Rd Ste 1300 2017 City Zip Code State Transaction ID: ADD2D15CAEB494A369D0 VA Alexandria 22314-6868 Amount of Each Receipt this Period FEC ID number of contributing 40.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) **AAPA** Researcher Receipt For: Aggregate Year-to-Date ▼ Primary General 460.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Smith, Noel, , , Date of Receipt Mailing Address 2318 Mill Rd 2017 Ste 1300 City State Zip Code Transaction ID: AAC024A46F8F94065A32 VA Alexandria 22314-6868 Amount of Each Receipt this Period FEC ID number of contributing 60.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) **AAPA** Researcher Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) 520.00 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name **c.** Sobel, Jonathan, , , Date of Receipt Mailing Address 94 Sherman Ave 2017 Zip Code State Transaction ID: AA4DDC9201051454FA20 NY Rockville Centre 11570-3136 Amount of Each Receipt this Period FEC ID number of contributing 50.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Northwell Health Senior Director PA Services Receipt For: Aggregate Year-to-Date ▼ Primary General 250.00 Other (specify) 150.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

SCHEDULE A (FEC Form 3X)

FOR LINE NUMBER: PAGE 35 OF Use separate schedule(s) (check only one) for each category of the **X** 11a 11b 11c 12 Detailed Summary Page

ITEMIZED RECEIPTS 13 14 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) American Academy of Physician Assistants Political Action Committee (PA PAC) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Sobel, Jonathan, , , Date of Receipt Mailing Address 94 Sherman Ave 2017 City Zip Code State Transaction ID: A1E2918D8DFDC4E689B6 Rockville Centre NY 11570-3136 Amount of Each Receipt this Period FEC ID number of contributing 50.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Northwell Health Senior Director PA Services Receipt For: Aggregate Year-to-Date ▼ Primary General 300.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name **B.** Sobel, Jonathan, , , Date of Receipt Mailing Address 94 Sherman Ave 2017 City State Zip Code Transaction ID: A2EFCCA835D3747828FC Rockville Centre NY 11570-3136 Amount of Each Receipt this Period FEC ID number of contributing 50.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Northwell Health Senior Director PA Services Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) 350.00 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name **c.** Sobel, Jonathan, , , Date of Receipt Mailing Address 94 Sherman Ave 2017 Zip Code State Transaction ID: A7792E0650B0D46D38B7 NY Rockville Centre 11570-3136 Amount of Each Receipt this Period FEC ID number of contributing 50.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Northwell Health Senior Director PA Services Receipt For: Aggregate Year-to-Date ▼ Primary General 400.00 Other (specify) 150.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

Use separate schedule(s) for each category of the Detailed Summary Page

F	OR	LINE	NU	MBER	PAGE		36 OF	=	56	
(check only one)										
	X	11a		11b		11c		12		
		13		14		15		16		17

Detailed Summary Page Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) American Academy of Physician Assistants Political Action Committee (PA PAC) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Sobel, Jonathan, , , Date of Receipt Mailing Address 94 Sherman Ave 2017 City Zip Code State Transaction ID: A1E1CCF771A504E23B8B Rockville Centre NY 11570-3136 Amount of Each Receipt this Period FEC ID number of contributing 50.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Senior Director PA Services Northwell Health Receipt For: Aggregate Year-to-Date ▼ Primary General 450.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name **B.** Sobel, Jonathan, , , Date of Receipt Mailing Address 94 Sherman Ave 2017 City State Zip Code Transaction ID : ADE692FDD9CAC43E2BDC Rockville Centre NY 11570-3136 Amount of Each Receipt this Period FEC ID number of contributing 50.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Northwell Health Senior Director PA Services Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) 500.00 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name **c.** Stewart, Christopher, John, , Date of Receipt Mailing Address 2318 Mill Road 2017 City Zip Code State Transaction ID: AC8D50DDA77DC4A0C92A Alexandria VA 22314-6833 Amount of Each Receipt this Period FEC ID number of contributing 50.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) AAPA AAPA Staff Receipt For: Aggregate Year-to-Date ▼ Primary General 250.00 Other (specify) 150.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

FOR LINE NUMBER: PAGE 37 OF Use separate schedule(s) (check only one) **X** 11a 11b 11c

for each category of the 12 Detailed Summary Page 13 14 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) American Academy of Physician Assistants Political Action Committee (PA PAC) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Stewart, Christopher, John, , Date of Receipt Mailing Address 2318 Mill Road 2017 City Zip Code State Transaction ID: AEB48F6A3D88546E4B77 VA Alexandria 22314-6833 Amount of Each Receipt this Period FEC ID number of contributing 50.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) AAPA Staff **AAPA** Receipt For: Aggregate Year-to-Date ▼ Primary General 300.00 Other (specify) ▼ Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Stewart, Christopher, John, Date of Receipt Mailing Address 2318 Mill Road 2017 City State Zip Code Transaction ID: AD3733D0F4BDB488699B VA Alexandria 22314-6833 Amount of Each Receipt this Period FEC ID number of contributing 50.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) **AAPA** AAPA Staff Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) 350.00 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name **c.** Stewart, Christopher, John, , Date of Receipt Mailing Address 2318 Mill Road 20 2017 City Zip Code State Transaction ID: A20D26F7DF0AE4799B52 Alexandria VA 22314-6833 Amount of Each Receipt this Period FEC ID number of contributing C 50.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) AAPA AAPA Staff Receipt For: Aggregate Year-to-Date ▼ Primary General 400.00 Other (specify) 150.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

TOTAL This Period (last page this line number only).....

EOD LINE NUMBER: DAGE 39 OF Use separate schedule(s)

I OH LINE NOWIDEH.						IAGL	٠ ,	00	Oi	00
(0	che	ck only								
	X	11a		11b		11c		12		
		13		14		15		16	;	17

for each category of the Detailed Summary Page Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) American Academy of Physician Assistants Political Action Committee (PA PAC) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Stewart, Christopher, John, , Date of Receipt Mailing Address 2318 Mill Road 2017 City Zip Code State Transaction ID: A048FE7A6C5694BB4800 VA Alexandria 22314-6833 Amount of Each Receipt this Period FEC ID number of contributing 50.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) AAPA Staff **AAPA** Receipt For: Aggregate Year-to-Date ▼ Primary General 450.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Stewart, Christopher, John, Date of Receipt Mailing Address 2318 Mill Road 2017 City State Zip Code Transaction ID: AB226AA2282144B7A82F VA Alexandria 22314-6833 Amount of Each Receipt this Period FEC ID number of contributing 90.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) **AAPA** AAPA Staff Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) ▼ 540.00 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name c. Thompson, JP, , , PA-C Date of Receipt Mailing Address 9500 Euclid Ave 2017 Dept S-40 City State Zip Code Transaction ID: ABBBF8E850D444C87B55 OH Cleveland 44195-0001 Amount of Each Receipt this Period FEC ID number of contributing C 50.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Cleveland Clinic Receipt For: Aggregate Year-to-Date ▼ Primary General 435.00 Other (specify) 190.00 SUBTOTAL of Receipts This Page (optional).....

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:					PAGE	39 OF	56
	(che						
	×	11a	11b		11c	12	
		13	14		15	16	17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) American Academy of Physician Assistants Political Action Committee (PA PAC) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Ward, Monica, Foote,, Date of Receipt Mailing Address 6335 Palo Pinto Ave 2017 City Zip Code State Transaction ID: AF790C886F83946FEBAB TX **Dallas** 75214-3619 Amount of Each Receipt this Period FEC ID number of contributing 50.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Baylor Scott & Dy White Receipt For: Aggregate Year-to-Date ▼ Primary General 250.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B Date of Receipt Mailing Address City State Zip Code Amount of Each Receipt this Period FEC ID number of contributing federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) ▼ Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Date of Receipt Mailing Address City State Zip Code Amount of Each Receipt this Period FEC ID number of contributing C federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) 50.00 SUBTOTAL of Receipts This Page (optional)..... 6622.00 TOTAL This Period (last page this line number only).....

17

SCHEDULE B (FEC Form 3X)	lloo ser :	roto cobedila(-)	FOR LINE		PAGE 40 OF 56
ITEMIZED DISBURSEMENTS		rate schedule(s) category of the	(check only	´	22 26 27
		Summary Page	X 21b 28a	22 28b	23 26 27 28c 29 30b
Any information copied from such Reports and Statem	l nents may n	not be sold or use			
or for commercial purposes, other than using the name	e and addre	ess of any politic	al committee to	solicit contrib	utions from such committee.
NAME OF COMMITTEE (In Full)					
American Academy of Physician As	ssistants	Political Ac	tion Comr	nittee (PA	PAC)
Full Name (Last, First, Middle Initial)				Date of Dis	hursamant
A. Aristotle				M M /	D D / Y Y Y Y
Mailing Address 205 Pennsylvania Avenue, SE				10	05 2017
,	State DC	Zip Code		FEC Identif	ication Number
Washington Purpose of Disbursement	DC	20003-1164			
Aristotle Fee				C	ation ID - DOD (CCODO)
Candidate Name			Category/		ction ID : B0D4CC2D0I Each Disbursement this Period
Office Cought:			Type	· · ·	14.59
Office Sought: House Disbursen Senate	nent For: Primary	General			14.59
	Other (spec			NA	Itam
State: District:				Memo	item
Full Name (Last, First, Middle Initial)					
B. Aristotle				Date of Dis	sbursement
Mailing Address 205 Pennsylvania Avenue, SE				10 /	10 2017
Walling Address 205 Fermsylvania Avenue, SE				10	10 2017
,	State	Zip Code		FEC Identif	ication Number
Washington Purpose of Disbursement	DC	20003-1164			
Aristotle Fee				C	11 ID D00504D0054
Candidate Name			Category/		ction ID : B66F34B22F6 Each Disbursement this Period
			Type		1150
Office Sought: House Disbursen Senate	nent For: Primary	General			14.59
	Other (spec			п	
State: District:		,		Memo	Item
Full Name (Last, First, Middle Initial)					
C. Aristotle				Date of Dis	
Mailing Address 205 Pennsylvania Avenue, SE				10	30 2017
,	State DC	Zip Code		FEC Identif	ication Number
Washington Purpose of Disbursement	DC	20003-1164		С	
Aristotle Fee					ction ID : B19F9008BB
Candidate Name			Category/		Each Disbursement this Period
Office Sought: House Disbursen	nont For		Туре		17.34
	Primary	General			17.01
	Other (spec			Memo	ltem
State: District:				LI MEITIO	
					40.50
SUBTOTAL of Disbursements This Page (optional)	•••••		·····•		46.52
TOTAL This Period (last page this line number only)					

S	CHEDULE B (FEC Form 3X)			FOR LINE NUMBER: PAGE 41 OF			
ITEMIZED DISBURSEMENTS		Use separate schedule(s)		(check only	NOMBELL.		
• •			category of the Summary Page	X 21b	22 23 26 27		
				28a	28b 28c 29 30b		
	y information copied from such Reports and Stater for commercial purposes, other than using the nar						
\setminus	NAME OF COMMITTEE (In Full)						
	American Academy of Physician A	ssistant	s Political Ad	ction Comn	nittee (PA PAC)		
_	Full Name (Last, First, Middle Initial)				Data of Dishamanant		
Α.	Aristotle				Date of Disbursement		
	Mailing Address 205 Pennsylvania Avenue, SE				11 16 2017		
	City	State	Zip Code		FEC Identification Number		
	Washington	DC	20003-1164				
	Purpose of Disbursement Aristotle Fee				C		
	Candidate Name				Transaction ID : BEE4F7FF17		
				Category/ Type	Amount of Each Disbursement this Period		
	Office Sought: House Disburser	ment For:		.,,,,	153.59		
	Senate	Primary	General		7 7 7		
	President	Other (spec	cify) ▼		Memo Item		
_	State: District:				ш		
D	Full Name (Last, First, Middle Initial)				Data of Dishumanant		
Ь.	Aristotle				Date of Disbursement		
	Mailing Address 205 Pennsylvania Avenue, SE				12 12 2017		
	Zoo i chiayivania Avenue, ee						
	City	State DC	Zip Code		FEC Identification Number		
	Washington Purpose of Dishurance						
	Purpose of Disbursement Aristotle Fee	Category/ Type			Transaction ID : BC3BE2F1C4		
	Candidate Name						
					Amount of Each Disbursement this Period		
	Office Sought: House Disburser	ment For:	I	, , , , , , , , , , , , , , , , , , ,	65.34		
	Senate	Primary	General				
	President	Other (spec	cify)		Memo Item		
_	State: District:						
_	Full Name (Last, First, Middle Initial)				Date of Disbursement		
C.	Aristotle						
	Mailing Address 205 Pennsylvania Avenue, SE				12 31 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y		
	City	State	Zip Code				
	Washington	DC	20003-1164		FEC Identification Number		
	Purpose of Disbursement Aristotle Fee				C		
					Transaction ID : B5A2981868		
	Candidate Name			Category/	Amount of Each Disbursement this Period		
	Office Sought: House Disburser	ment For:		Туре	122.69		
	Senate Disburser	Primary	General		7 7 7		
	President	Other (spec			Memo Item		
	State: District:				Metho item		
Г	·	_					
s	UBTOTAL of Disbursements This Page (optional)				341.62		
Γ.							
ΙŢ	OTAL This Period (last page this line number only))					

SCHEDULE B (FEC Form 3X)		FOR LINE NUMBER: PAGE 42 O				F 56				
ITEMIZED DISBURSEMENTS		rate schedule(s) category of the	(check only one)					7.07		
		Summary Page	<u>×</u>	21b 28a	22 28b	23		26 29	27 30b	
Any information copied from such Reports and Statem	nente may n	ot he sold or us	ed by any							one
or for commercial purposes, other than using the name										
NAME OF COMMITTEE (In Full)										
American Academy of Physician As	ssistants	Political A	ction C	omn	nittee (PA PA	AC)			
Full Name (Last, First, Middle Initial)					Data	f Diahur	omont			
A. Bank of America						f Disburs				
Mailing Address 600 N Washington St					12	/ B	31		2017	Y
City	State	Zip Code			FEC Id	entificati	on Nun	nber		
Alexandria Purpose of Disbursement	VA	22314-1914							-	
Bank fees			T		С					
Candidate Name			Catego	2//		ansactio			F9A1 : nt this Po	arind
			Type	y/	Amoun	t of Lac	Disbu	ii 30iii 0i	11 1113 1	Cilou
Office Sought: House Disbursen	nent For:								371.76	;
	Primary	General								
State: District:	Other (speci	iiy) ▼			Me	mo Item				
Full Name (Last, First, Middle Initial)										
В.					Date o	f Disburs	sement			
					M = M	/ D	D /	Y	Y Y Y	Y
Mailing Address							_	-		_
City	State	Zip Code			EEC Id	entificati	on Nun	abor		
						enuncau	on Nun	ibei	-	
Purpose of Disbursement			· · ·		C					
Candidate Name			Cotogo	24	Amoun	t of Eoo	a Diobu	roomor	at this D	oriod
			Catego Type	y/	Amoun	t of Lac	ו טוטטט	ii Seillei	nt this Po	enou
Office Sought: House Disbursen								-	1 45	
	Primary	General				,				
President State: District:	Other (speci	шу)			Me	mo Item				
Full Name (Last, First, Middle Initial)										
C.					Date o	f Disburs	sement			
					M = M	/ D	D /	Y	Y	Y
Mailing Address							_	_		_
City	State	Zip Code			EEC Id	entificati	on Num	nhor		
						entineati	on Nun	ibei	-	
Purpose of Disbursement			T		C					
Candidate Name			Cotogo	0.//	Amoun	t of Eac	n Diehu	ırcamar	nt this Po	ariod
			Catego Type	у/	Amoun	t of Lac	Disbu	ii Seillei	11 11113 1	enou
Office Sought: House Disbursen								,	- 45	
	Primary	General								
State: District:	Other (speci	шу) ▼			Me	mo Item				
Side.					_	-	-	-		_
SUBTOTAL of Disbursements This Page (optional)				•				- ·	371.70	6
				_	_	,	-	-	750.0	
TOTAL This Period (last page this line number only)				•		. ,			759.90	U

SCHEDULE B (FEC Form 3X)	Use separate schedule(s)	FOR LINE I	
ITEMIZED DISBURSEMENTS	for each category of the Detailed Summary Page	(check only 21b 28a	one) 22 X 23 26 27 28b 28c 29 30b
Any information copied from such Reports and Staten or for commercial purposes, other than using the name			
NAME OF COMMITTEE (In Full)			
American Academy of Physician As	ssistants Political Act	tion Comm	nittee (PA PAC)
Full Name (Last, First, Middle Initial)			Data of Bishamanan
A. BERGMAN FOR CONGRESS Mailing Address 3585 BUNKER HILL RD, #434			Date of Disbursement M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Maining Address 5555 BOTTLETTE, #404			10 10 2017
,	State Zip Code	T	FEC Identification Number
Acme Purpose of Disbursement	MI 49610-5004		0.0004044
Re-election 2018			C C00614214
Candidate Name		0-1	Transaction ID : B8DB931E69
Bergman, John, W., ,		Category/ Type	Amount of Each Disbursement this Period
Office Sought: House Disbursen	nent For: 2018 Primary General	71-1	1000.00
State: MI District: 01	Other (specify) ▼		Memo Item
Full Name (Last, First, Middle Initial)			
B. BILL CASSIDY FOR US SENATE			Date of Disbursement
Mailing Address PO BOX 80505			09 15 2017
•	State Zip Code		FEC Identification Number
BATON ROUGE Purpose of Disbursement	LA 70898		0.00540000
2020			C C00543983
Candidate Name		Category/	Transaction ID : B6102D730EI Amount of Each Disbursement this Period
Cassidy, Bill, , ,		Type	Amount of Each Disbursement this Fellou
	nent For: 2020		1000.00
[**]	Primary General		
State: LA District:	Other (specify)		Memo Item
Full Name (Last, First, Middle Initial) C. BUDDY CARTER FOR CONGRES	SS		Date of Disbursement
Mailing Address 200 E ST JULIAN ST SUITE 603			M M / D D / Y Y Y Y Y 12 2017
City	State Zip Code		
SAVANNAH	GA 31401		FEC Identification Number
Purpose of Disbursement Re-election 2018			C C00543967 Transaction ID : BC39D1D55F
Candidate Name		Category/	Amount of Each Disbursement this Period
Carter, Buddy, , ,		Type	
Senate	nent For: 2018 Primary General		1000.00
State: GA District: 01	Other (specify) ▼		Memo Item
			3000.00
SUBTOTAL of Disbursements This Page (optional)		<u> </u>	7 7 7
TOTAL This Period (last page this line number only)			

SCHEDULE B (FEC Form 3X)		FOR LINE NUMBER: PAGE 44 OF				
ITEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the Detailed Summary Page	(check only 21b 28a				
Any information copied from such Reports and State						
or for commercial purposes, other than using the nar NAME OF COMMITTEE (In Full)	ne and address of any politica	zi commutee to	SOURT COMMINUTED ITOM SUCH COMMITTEE.			
American Academy of Physician A	ssistants Political Ac	tion Comn	nittee (PA PAC)			
Full Name (Last, First, Middle Initial) A. BUDDY CARTER FOR CONGRES	SS		Date of Disbursement			
Mailing Address 200 E ST JULIAN ST SUITE 603			07 31 2017			
SAVANNAH	State Zip Code GA 31401		FEC Identification Number			
Purpose of Disbursement Re-election 2018 Candidate Name			C C00543967 Transaction ID : B2B0A3121A			
Carter, Buddy, , ,		Category/ Type	Amount of Each Disbursement this Period			
Senate x	ment For: 2018 Primary General		1000.00			
State: GA District: 01	Other (specify) ▼		Memo Item			
Full Name (Last, First, Middle Initial) B. CARPER FOR SENATE Mailing Address PO BOX 2882			Date of Disbursement M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y			
City WILMINGTON Purpose of Disbursement Re-election 2018	State Zip Code DE 19805		FEC Identification Number C C00349217			
Candidate Name Carper, Tom, R., , Office Sought: House Senate President State: DE District:	ment For: 2018 Primary General Other (specify)	Category/ Type	Transaction ID: BECB04419C Amount of Each Disbursement this Period 1000.00 Memo Item			
Full Name (Last, First, Middle Initial) C. CARPER FOR SENATE			Date of Disbursement			
Mailing Address PO BOX 2882			08 10 2017			
City WILMINGTON Purpose of Disbursement Re-election 2018 Candidate Name Carper, Tom, R., ,	State Zip Code DE 19805	Category/	FEC Identification Number C C00349217 Transaction ID: B1F3B1DFE4 Amount of Each Disbursement this Period			
	ment For: 2018 Primary General Other (specify)	Туре	1000.00 Memo Item			
SUBTOTAL of Disbursements This Page (optional)		······•	3000.00			
TOTAL This Period (last page this line number only)		1			

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS	Use separate schedule(s	FOR LINE (check only			
ITEWILED DISBURSEMENTS	for each category of the Detailed Summary Page	21b 28a	22 x 23 26 27 28b 28c 29 30b		
Any information copied from such Reports and Statem or for commercial purposes, other than using the nam					
NAME OF COMMITTEE (In Full) American Academy of Physician As	· · · · · · · · · · · · · · · · · · ·				
Full Name (Last, First, Middle Initial) A. CASTOR FOR CONGRESS			Date of Disbursement		
Mailing Address 301 W PLATT STREET, #385			11 01 2017		
TAMPA	State Zip Code FL 33606		FEC Identification Number		
Purpose of Disbursement Re-election 2018 Candidate Name		Catagory	C C00410761 Transaction ID: B75A0C664E		
Castor, Kathy, A., , Office Sought: M House Disbursem	nent For: 2018	Category/ Type	Amount of Each Disbursement this Period 1000.00		
	Primary General Other (specify) ▼		Memo Item		
B. COLLINS FOR CONGRESS			Date of Disbursement		
Mailing Address PO BOX 386	State 7in Code		07 18 2017		
,	State Zip Code NY 14031		FEC Identification Number		
Re-election 2018 Candidate Name		Category/	C C00520379 Transaction ID : B14D0B3E7A Amount of Each Disbursement this Period		
Senate x	nent For: 2018 Primary General Other (specify)	Type	1000.00 Memo Item		
Full Name (Last, First, Middle Initial) C. COLLINS FOR SENATOR			Date of Disbursement		
Mailing Address PO BOX 1096			08 01 2017		
,	State Zip Code ME 04402-1096		FEC Identification Number C C00314575		
Candidate Name Collins, Susan, M., ,		Category/ Type	Transaction ID: BF9ECE7682 Amount of Each Disbursement this Period		
x Senate	nent For: 2020 Primary General Other (specify)		- 1000.00 Memo Item		
SUBTOTAL of Disbursements This Page (optional)		······•	1000.00		

SCHEDULE B (FEC Form 3X)	Use separate schedule(s)	FOR LINE NUMBER: PAGE 46 OF
ITEMIZED DISBURSEMENTS	for each category of the Detailed Summary Page	(check only one) 21b 22 28a 28b 28c 29 30b
		by any person for the purpose of soliciting contributions committee to solicit contributions from such committee.
NAME OF COMMITTEE (In Full)		
American Academy of Physician As	ssistants Political Acti	on Committee (PA PAC)
Full Name (Last, First, Middle Initial)		5.4 (5:4
A. COLLINS FOR SENATOR Mailing Address PO BOX 1096		Date of Disbursement 10 16 2017
,	tate Zip Code	FEC Identification Number
Bangor Purpose of Disbursement	ME 04402-1096	
2020		C C00314575
Candidate Name	<u>L</u>	Transaction ID : B13D26A954I
Collins, Susan, M., ,		Category/ Amount of Each Disbursement this Period Type
	nent For: 2020	1000.00
x Senate	Primary General Other (specify) ▼	Memo Item
State: ME District:		Wellio Itelli
Full Name (Last, First, Middle Initial)		
B. FEINSTEIN FOR SENATE 2018		Date of Disbursement
		M M / D D / Y Y Y Y
Mailing Address 918 PENNSYLVANIA AVE SE	I	11 29 2017
,	State Zip Code DC 20003	FEC Identification Number
Purpose of Disbursement	20003	C C00539890
Re-election 2018		
Candidate Name		Category/ Amount of Each Disbursement this Peric
Feinstein, Dianne, , ,		Type
Office Sought: House Disburser	nent For: 2018	1000.00
	Primary General	, , , , , , , , , , , , , , , , , , , ,
President State: CA District:	Other (specify)	Memo Item
Full Name (Last, First, Middle Initial)		
C. FRIENDS OF MAZIE HIRONO		Date of Disbursement
Mailing Address PO BOX 677		09 15 2017
City	tate Zip Code	FEC Identification Number
HONOLULU	HI 96809	1 LO Identification (Vulliber
Purpose of Disbursement Re-election 2018		C C00420760 Transaction ID : BCD8476C10
Candidate Name		Category/ Amount of Each Disbursement this Period
Hirono, Mazie, K., ,	pont Fore pass	Type 1000.00
	nent For: 2018	1000.00
<u>"</u> X	Primary ☐ General Other (specify) ▼	
State: HI District:	onioi (specify) ▼	Memo Item
111 210000		
SUBTOTAL of Disbursements This Page (optional)		3000.00
CONTROL OF BIODUTORING THIS T AGE (OPHORIAI)		
TOTAL This Period (last page this line number only).		

SCHEDULE B (FEC Form 3X)		FOR LINE	NUMBER: PAGE 47 OF 56
ITEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the	(orleast orlin)	
	Detailed Summary Page	21b 28a	22 x 23 26 27 28b 28c 29 30b
Any information copied from such Reports and State	monto mov not be cold or us		
or for commercial purposes, other than using the nar			
NAME OF COMMITTEE (In Full)			
American Academy of Physician A	ssistants Political A	ction Comn	nittee (PA PAC)
Full Name (Last, First, Middle Initial)			
A. FRIENDS OF PAT TOOMEY			Date of Disbursement
Mailing Address 228 S. WASHINGTON ST., SUITE	115		09 15 2017
City	State Zip Code		FFC Identification Number
ALEXANDRIA	VA 22314		FEC Identification Number
Purpose of Disbursement 2022			C C00461046
Candidate Name			Transaction ID : BD660E57FF
Toomey, Pat, J., ,		Category/ Type	Amount of Each Disbursement this Period
	ment For: 2022	туре	1000.00
x Senate x	Primary General		<u> </u>
State: PA District:	Other (specify) ▼		Memo Item
Full Name (Last, First, Middle Initial)			
B. FRIENDS OF SHERROD BROWN	J		Date of Disbursement
			M = M / D = D / Y = Y = Y
Mailing Address PO BOX 76187			10 16 2017
,	State Zip Code DC 20013		FEC Identification Number
WASHINGTON Purpose of Disbursement	DC 20013		C C00264697
Re-election 2018			
Candidate Name		Category/	Transaction ID : BB6120F3CEl Amount of Each Disbursement this Period
Brown, Sherrod, C., ,		Type	
\vdash \bullet \bullet	ment For: 2018		1000.00
X Senate X	Other (specify) General		
State: OH District:	Other (specify)		Memo Item
Full Name (Last, First, Middle Initial)			
GEORGIANS FOR ISAKSON			Date of Disbursement
			M M / D D / Y Y Y Y
Mailing Address POST OFFICE BOX 250116			09 15 2017
City	State Zip Code		
ATLANTA	GA 30325		FEC Identification Number
Purpose of Disbursement			C C00384693
2022			Transaction ID : BD8DF57E98
Candidate Name		Category/	Amount of Each Disbursement this Period
Isakson, Johnny, , , Office Sought: House Disburse	ment For: 2022	Type	1000.00
x Senate	Primary General		4 4
President	Other (specify) ▼		Memo Item
State: GA District:			Metho item
			2222.22
SUBTOTAL of Disbursements This Page (optional)		·····•	3000.00
TOTAL This Period (last page this line number only)		
····· · ····· · (.act page tille lille lidille)	,		

SCHEDULE B (FEC Form 3X)		FOR LINE N	NUMBER: PAGE 48 OF 56
TEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the	(check only	
	Detailed Summary Page	21b 28a	22 x 23 26 27 28b 28c 29 30b
Any information copied from such Reports and Statem	conte may not be cold or used		
or for commercial purposes, other than using the nam			
NAME OF COMMITTEE (In Full)			
American Academy of Physician As	ssistants Political Act	ion Comm	ittee (PA PAC)
Full Name (Last, First, Middle Initial)			B (B)
A. GRASSLEY COMMITTEE INC			Date of Disbursement
Mailing Address PO BOX 1000			11 01 2017
,	State Zip Code		FEC Identification Number
DES MOINES	IA 50304		
Purpose of Disbursement 2022			C C00230482
Candidate Name		Category/	Transaction ID: B06C9AFC64 Amount of Each Disbursement this Period
Grassley, Chuck, , ,		Type	Authority of Each Biosardinent une Feried
	nent For: 2022		1000.00
	Primary General Other (specify) ▼		Memo Item
State: IA District:			Wello itelli
Full Name (Last, First, Middle Initial)			
B. GRAVES FOR CONGRESS			Date of Disbursement
Mailing Address 2245 CRAND BLVD			10 16 2017
Mailing Address 2345 GRAND BLVD			10 10 2017
,	State Zip Code 64108		FEC Identification Number
Purpose of Disbursement	04100		C C00359034
Re-election 2018			Transaction ID : BCA67FAC65
Candidate Name		Category/	Amount of Each Disbursement this Period
Graves, Sam, B., , Jr.		Туре	1000.00
	nent For: 2018		1000.00
	Primary General Other (specify)		
State: MO District: 06	Caron (opcony)		Memo Item
Full Name (Last, First, Middle Initial)			
C. HELLER FOR SENATE			Date of Disbursement
Mailing Address PO BOX 371907			09 15 2017
maming / tauriess C BOX 0/ 100/			
,	State Zip Code		FEC Identification Number
LAS VEGAS Purpose of Disbursement	NV 89137		0 200
Re-election 2018			C C00494229
Candidate Name		Category/	Transaction ID : B43ECC5B8I Amount of Each Disbursement this Period
Heller, Dean, , ,		Type	
	nent For: 2018		1000.00
	Other (appoint) —		
State: NV District:	Other (specify) ▼		Memo Item
2.00.00			
SUBTOTAL of Disbursements This Page (optional)			3000.00
TOTAL This Period (last page this line number only).			

SCHEDULE B (FEC Form 3X)	Use separate schedule(s	FOR LINE NUMBER: PAGE 49 O (check only one)				
ITEMIZED DISBURSEMENTS	for each category of the Detailed Summary Page	21b	22 X 23 26 27 28b 28c 29 30b			
Any information copied from such Reports and Statem or for commercial purposes, other than using the nam-						
NAME OF COMMITTEE (In Full) American Academy of Physician As	· · · · · · · · · · · · · · · · · · ·					
Full Name (Last, First, Middle Initial)			Data of Diel			
A. Karen Bass for Congress			Date of Disbursement			
Mailing Address 1280 Bison Avenue Suite B9-585			11 01 2017			
,	State Zip Code CA 92660		FEC Identification Number			
Purpose of Disbursement	-·· 3200U		C C00476523			
Re-election 2018			Transaction ID : BDBA315EBI			
Candidate Name		Category/	Amount of Each Disbursement this Period			
Bass, Karen, R., , Office Sought: X House Disbursem	nent For: 2018	Туре	1000.00			
	Primary General					
	Other (specify) ▼		Memo Item			
Full Name (Last, First, Middle Initial)						
B. KIND FOR CONGRESS COMMITT	TEE		Date of Disbursement			
Mailing Address age of the Communication			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y			
Mailing Address 205 5th Avenue South			07 05 2017			
,	State Zip Code WI 54601		FEC Identification Number			
La Crosse Purpose of Disbursement	WI 54601		C C00312017			
Re-election 2018			Transaction ID : B5EC60E0180			
Candidate Name		Category/	Amount of Each Disbursement this Period			
Kind, Ron, J., , Office Sought: Y House Disbursem	nent For: 2018	Туре	1000.00			
	Primary General		1000.00			
	Other (specify)		Memo Item			
State: WI District: 03			Mono nem			
Full Name (Last, First, Middle Initial)			Date of Disbursement			
C. KUSTER FOR CONGRESS, INC						
Mailing Address PO BOX 1498			09 15 2017			
City	State Zip Code		FEC Identification Number			
Concord	NH 03302-1498					
Purpose of Disbursement Re-election 2018			C C00462861			
Candidate Name		Catacar:	Transaction ID : B610D7B25D Amount of Each Disbursement this Period			
Kuster, Ann, McLane, ,		Category/ Type	Amount of Lacif Dispulsement this Period			
Office Sought: House Disbursem	nent For: 2018		1000.00			
	Primary General					
State: NH District: 02	Other (specify) ▼		Memo Item			
VI 2:00:00. UZ						
SUBTOTAL of Disbursements This Page (optional)			3000.00			
		<u> </u>				
TOTAL This Period (last page this line number only).						

SCHEDULE B (FEC Form 3X)	Use separate schedule(s)	FOR LINE N					
ITEMIZED DISBURSEMENTS	for each category of the Detailed Summary Page	(check only one) 21b 22 28a 28b 28c 29 30b					
Any information copied from such Reports and Statem or for commercial purposes, other than using the name							
NAME OF COMMITTEE (In Full)							
American Academy of Physician As	ssistants Political Act	ion Comm	nittee (PA PAC)				
Full Name (Last, First, Middle Initial)							
A. LONE STAR LEADERSHIP PAC			Date of Disbursement				
Mailing Address 7315 Wisconsin Avenue Suite 310 East			07 18 2017				
City	State Zip Code		FEC Identification Number				
2011.0000	MD 20814		TEO Idonamodion Nambol				
Purpose of Disbursement Re-election 2018		: :	C C00415208 Transaction ID : BA94B796E4				
Candidate Name		Category/	Amount of Each Disbursement this Period				
LONE STAR LEADERSHIP PAC		Туре	1000.00				
Senate x	nent For: 2018 Primary General Other (specify)		1000.00				
State: District:	Other (specify)		Memo Item				
Full Name (Last, First, Middle Initial) B. MANCHIN FOR WEST VIRGINIA			Date of Disbursement				
- WANCHINT OR WEST VIRGINIA			M M / D D / Y Y Y Y				
Mailing Address PO BOX 5202	ailing Address PO BOX 5202						
,	State Zip Code WV 25361		FEC Identification Number				
Purpose of Disbursement	Purpose of Disbursement Re-election 2018						
Re-election 2018							
Candidate Name							
Manchin, Joe, , , III	anchin, Joe, , , III Type						
	nent For: 2018		1000.00				
	Primary General		_				
State: WV District:	Other (specify)		Memo Item				
Full Name (Last, First, Middle Initial)	.00		Date of Disbursement				
C. MIKE THOMPSON FOR CONGRE	355						
Mailing Address 5429 Madison Avenue			07 18 2017				
City	State Zip Code		FEC Identification Number				
Sacramento	CA 95841						
Purpose of Disbursement Re-election 2018		C C00326363 Transaction ID : B89BBCB170					
Candidate Name Thompson Mike	-	Category/	Amount of Each Disbursement this Period				
Thompson, Mike, , , Office Sought: House Disbursen	nent For: 2018	Туре	1500.00				
	Primary General		100.00				
State: CA District: 05	Other (specify) ▼		Memo Item				
Claid: G/(District G							
SUBTOTAL of Disbursements This Page (optional)			3500.00				
TOTAL This Period (last page this line number only)							

SCHEDULE B (FEC Form 3X)	Use separate schedule(s)	FOR LINE N				
ITEMIZED DISBURSEMENTS	for each category of the Detailed Summary Page	(check only one) 21b 22 X 23 26 27 28a 28b 28c 29 30b				
Any information copied from such Reports and Statem or for commercial purposes, other than using the nam						
NAME OF COMMITTEE (In Full)	· · · · · · · · · · · · · · · · · · ·					
American Academy of Physician As	ssistants Political Acti	ion Comm	ittee (PA PAC)			
Full Name (Last, First, Middle Initial)			Data of Bishamanan			
A. PAT ROBERTS FOR US SENATE Mailing Address PO BOX 433	INC		Date of Disbursement M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y			
Maining Address 1 & Box 186			FEC Identification Number			
,	State Zip Code					
GREAT BEND Purpose of Disbursement	KS 67530		0 0000000			
2020			C C00128876			
Candidate Name		0	Transaction ID : BE2F4E9DCE			
Roberts, Pat, , ,		Category/ Type	Amount of Each Disbursement this Period			
Office Sought: House Disbursem	nent For: 2020 Primary General	-3,60	1000.00			
State: KS District:	Other (specify) ▼		Memo Item			
Full Name (Last, First, Middle Initial)						
B. PAUL TONKO FOR CONGRESS			Date of Disbursement			
Mailing Address 911 CENTRAL AVENUE	Mailing Address 911 CENTRAL AVENUE					
ALBANY	itate Zip Code NY 12206		FEC Identification Number C C00450049			
•	rpose of Disbursement Re-election 2018					
Candidate Name						
Tonko, Paul, D., ,	Category/	Amount of Each Disbursement this Period				
	Primary General		1000.00			
	Other (specify)		Memo Item			
Full Name (Last, First, Middle Initial)			B (B)			
C. PEOPLE FOR DEREK KILMER			Date of Disbursement			
Mailing Address PO BOX 1381	ng Address PO BOX 1381					
City	State Zip Code		FEC Identification Number			
	WA 98402		Teo identification (valide)			
Purpose of Disbursement	Г		C C00514893			
Candidate Name			Transaction ID: B3B358B55D			
Kilmer, Derek, , ,		Category/ Type	Amount of Each Disbursement this Period			
Office Sought: House Disbursem	nent For: 2018 Primary General	Туре	1000.00			
State: WA District: 06	Other (specify) ▼		Memo Item			
			3000.00			
SUBTOTAL of Disbursements This Page (optional)		·····•	3000.00			
TOTAL This Period (last page this line number only).						

SCHEDULE B (FEC Form 3X)	Use separate schedule(s)	FOR LINE NUMBER: PAGE 52 OF			
ITEMIZED DISBURSEMENTS	for each category of the Detailed Summary Page	(check only one) 21b 22 28a 28b 28c 29 30b			
		by any person for the purpose of soliciting contributions committee to solicit contributions from such committee.			
NAME OF COMMITTEE (In Full)	71				
American Academy of Physician As	ssistants Political Act	on Committee (PA PAC)			
Full Name (Last, First, Middle Initial) A. RICHARD F NEAL FOR CONGRE		Date of Disbursement			
A. RICHARD E NEAL FOR CONGRE	SS COMMITTEE	M M / D D / Y Y Y Y			
Mailing Address 76 MAGNOLIA TERRACE		10 16 2017			
,	tate Zip Code	FEC Identification Number			
Spinighters.	MA 01108-2533				
Purpose of Disbursement Re-election 2018	l r	C C00226522			
		Transaction ID : BDE315AF70			
Candidate Name		Category/ Amount of Each Disbursement this Period			
Neal, Richard, E., ,		Type			
	nent For: 2018	1000.00			
President	Primary ☐ General Other (specify) ▼	Memo Item			
State: MA District: 01					
Full Name (Last, First, Middle Initial)	_				
B. ROB WOODALL FOR CONGRESS	3	Date of Disbursement			
Mailing Address POST OFFICE BOX 1871					
City					
-	tate Zip Code GA 30046	FEC Identification Number			
Purpose of Disbursement		C C00482307			
Re-election 2018		Transaction ID : BC68779A668			
Candidate Name	Candidate Name Category/				
Woodall, Rob, , , III	Category/ Amount of Each Disbursement this Period Type				
Office Sought: House Disbursem	ent For: 2018	1000.00			
Senate x	Primary General				
President	Other (specify)	Memo Item			
State: GA District: 07		Memo item			
Full Name (Last, First, Middle Initial)					
C. ROUNDS FOR SENATE		Date of Disbursement			
		M M / D D / Y Y Y			
Mailing Address PO BOX 250		10 16 2017			
O't.	7:- O1-				
-	tate Zip Code SD 57501	FEC Identification Number			
Purpose of Disbursement					
2020		C C00532465			
Candidate Name		Transaction ID : B9BE5F9337			
Rounds, Mike, , ,		Category/ Amount of Each Disbursement this Period Type			
	nent For: 2020	1000.00			
Canata	Primary General	4 4			
	Other (specify)				
State: SD District:	C (opcony) ▼	Memo Item			
ciaic. OD Biolifot.					
SUBTOTAL of Disbursements This Page (optional)		3000.00			
SUBTUTAL of Disbursements This Page (optional)					
TOTAL This Period (last page this line number only).					

SCHEDULE B (FEC Form 3X)	Use separate schedule(s)	FOR LINE N						
ITEMIZED DISBURSEMENTS	for each category of the Detailed Summary Page	(check only one) 21b 22 23 26 27 28a 28b 28c 29 30b						
Any information copied from such Reports and Statem or for commercial purposes, other than using the name								
NAME OF COMMITTEE (In Full)	The state of the political		2. 2. 2. 2. 2. 2. 2. 2. 2. 2. 2. 2. 2. 2					
American Academy of Physician As	ssistants Political Ac	tion Comm	nittee (PA PAC)					
Full Name (Last, First, Middle Initial)								
A. STABENOW FOR US SENATE			Date of Disbursement					
Mailing Address P.O. BOX 4945			FEC Identification Number					
EAST LANSING	State Zip Code MI 48826							
Purpose of Disbursement Re-election 2018			C C00344473 Transaction ID : BCBF1FD8Al					
Candidate Name Stabenow, Debbie, A., ,		Category/ Type	Amount of Each Disbursement this Period					
Office Sought: House Disbursen	nent For: 2018 Primary General	туре	1000.00					
	Other (specify) ▼		Memo Item					
Full Name (Last, First, Middle Initial)								
B. TEAM RYAN	,							
Mailing Address 320 1ST ST SE			10 16 2017					
WASHINGTON	State Zip Code DC 20003		FEC Identification Number					
Purpose of Disbursement Re-election 2018			C C00545947 Transaction ID : B2974409A98					
Candidate Name TEAM RYAN	Category/							
	nent For: 2018	туре	2000.00					
Senate x	Primary General Other (specify)							
State: District:	(-),,		Memo Item					
Full Name (Last, First, Middle Initial) C. TOM REED FOR CONGRESS			Date of Disbursement					
Mailing Address PO BOX 10847			11 01 2017					
,	State Zip Code		FEC Identification Number					
ROCHESTER Purpose of Disbursement	NY 14610		C C00464032					
Re-election 2018 Candidate Name	election 2018							
Reed, Tom, W., , II		Category/ Type	Amount of Each Disbursement this Period					
Office Sought: House Senate Disbursen	nent For: 2018 Primary General		1000.00					
State: NY District: 23	Other (specify) ▼		Memo Item					
SUBTOTAL of Disbursements This Page (optional)			4000.00					
TOTAL This Period (last page this line number only)			7 7 7					

SCHEDULE B (FEC Form 3X)	Use separate schedule(s)	FOR LINE N						
TEMIZED DISBURSEMENTS	for each category of the Detailed Summary Page	(check only one) 21b 22 X 23 26 27 28a 28b 28c 29 30b						
Any information copied from such Reports and Statem or for commercial purposes, other than using the name								
NAME OF COMMITTEE (In Full)								
American Academy of Physician As	ssistants Political Act	ion Comm	nittee (PA PAC)					
Full Name (Last, First, Middle Initial)			Date of Disbursement					
A. VOLUNTEERS FOR SHIMKUS			M M / D D / Y Y Y					
Mailing Address PO BOX 661			08 04 2017 FEC Identification Number					
,	State Zip Code							
COLLINSVILLE Purpose of Disbursement	IL 62234							
VOID - 2018 Re-election			C C00258855					
Candidate Name	l		Transaction ID: B7307197496 Amount of Each Disbursement this Period - 1500.00					
Shimkus, John, M., ,		Category/ Type						
	nent For: 2017	.,,,,						
	Primary General		7 7					
President State: IL District: 15	Other (specify) ▼		Memo Item					
Full Name (Last, First, Middle Initial)								
B. WENSTRUP FOR CONGRESS			Date of Disbursement					
Mailing Address PO BOX 9551								
,	State Zip Code OH 45209		FEC Identification Number					
CINCINNATI Purpose of Disbursement	OH 45209		C C00407949					
Re-election 2018			C C00497818 Transaction ID : B9D72B4C9D					
Candidate Name	Wenstrup, Brad, R., ,							
Wenstrup, Brad, R., ,								
	Primary General		7 7 7					
State: OH District: 02	Other (specify)		Memo Item					
Full Name (Last, First, Middle Initial)								
C. WYDEN FOR SENATE			Date of Disbursement					
Mailing Address 232 NE 9TH AVENUE		11 29 2017						
City	State Zip Code		FFO Identification Number					
PORTLAND	OR 97232		FEC Identification Number					
Purpose of Disbursement 2022		· · · ·	C C00308676					
Candidate Name	L	Catananii	Transaction ID: BF3C570844 Amount of Each Disbursement this Period					
Wyden, Ron, , ,		Category/ Type	Amount of Each Dispursement this Fellou					
Office Sought: House Disbursen	nent For: 2022		1000.00					
	Primary General Other (specify) ▼							
State: OR District:	onici (apooliy) ▼		Memo Item					
C. C. C.								
SUBTOTAL of Disbursements This Page (optional)			500.00					
TOTAL This Period (last page this line number only)			33000.00					

S	CHEDULE B (FEC Form 3X)			FOR LINE NUMBER: PAGE 55 C						
IT	EMIZED DISBURSEMENTS		rate schedule(s) category of the	(check only one)						
			Summary Page	21b x 28a		23 28c	26 27 29 30b			
Γ_Λ,	ny information copied from such Reports and Staten	nonte may n	ot be sold or us							
	for commercial purposes, other than using the name									
\setminus	NAME OF COMMITTEE (In Full)									
	American Academy of Physician A	ssistants	Political A	ction Com	mittee (P	A PAC	;)			
_	Full Name (Last, First, Middle Initial)				Data of	D:-1	1			
Α.	Carabba, Anthony, , ,				Date of	Disbursen				
	Mailing Address 3710 S Johnson St					11 27 2017				
	,	State WA	Zip Code 99337-2473		FEC Identification Number					
	Purpose of Disbursement	VVA	99337-2473		C					
	Refund					ti !	D - DC550400044			
	Candidate Name			Category/		Transaction ID: BC5F2109044 Amount of Each Disbursement this Period				
	Office Sought: House Disbursen	nent For:		Туре		50.00				
		Primary	General			7	1-7-1-1-7-1			
		Other (spec	ify) ▼		Mem	no Item				
_	State: District:									
В.	Full Name (Last, First, Middle Initial) Daruthayan, Constance, , ,				Date of Disbursement					
	Dardinayan, Constance, , ,				M M / D D / Y Y Y Y					
	Mailing Address 1540 1/2 Palm Ave SW	ess 1540 1/2 Palm Ave SW			07 12 2017					
	,	State Zip Code			FEC Identification Number					
	Seattle Purpose of Disbursement	ose of Disbursement und didate Name Category/								
	Refund					Transaction ID : BDA2C0D2E7 Amount of Each Disbursement this Perio				
	Candidate Name									
	Office Sought: House Disbursen	Disbursement For:			100.00					
		Primary	General				4			
		Other (spec	ify)	Memo Item						
_	State: District:				<u> </u>					
C.	Full Name (Last, First, Middle Initial) Heglund, Jennifer, Louise, ,				Date of Disbursement					
						M M / D D / Y Y Y Y				
	Mailing Address 435 S Crystal St Ste 400					09 13 2017				
		State	Zip Code		FFC Ide	ntification	Number			
	Butte					timodilori	Trumbor			
	Purpose of Disbursement Refund Candidate Name Category/				C					
						Transaction ID : B2A885CE31 Amount of Each Disbursement this Period 50.00				
	Office Sought: House Disbursen	Type Sought: House Disbursement For:								
					4 4					
	President	Other (spec	ify) ▼	Memo Item						
_	State: District:									
8	SUBTOTAL of Disbursements This Page (optional)			·····			200.00			
T-	OTAL This David (last name this line name)									
1 1	OTAL This Period (last page this line number only)									

				PAGE 56 OF 56				
ITEMIZED DISBURSEMENTS		arate schedule(s) category of the	(check only one)					
		Summary Page	21b 28a		23 26 27 28c 29 30b			
Any information copied from such Reports and State	Ments may i	not be sold or use						
or for commercial purposes, other than using the nar								
NAME OF COMMITTEE (In Full)								
American Academy of Physician A	ssistant	s Political Ad	tion Comn	nittee (PA F	PAC)			
Full Name (Last, First, Middle Initial)					Date of Disbursement			
A. Jackson, Jenny, L., , PA-C								
Mailing Address 2 Hartland Ave					12 2017			
,	State			FEC Identification Number				
Huntington Station Purpose of Disbursement	NY	11746-2713						
Refund				C				
Candidate Name			Category/		tion ID : BC67EA34C9 ach Disbursement this Period			
			Type	Amount of E	don Biobarcomoni this Fenoa			
	ment For:				100.00			
Senate President	Senate Primary General							
State: District:	Other (spec	Sily) 🔻		Memo Ite	em			
Full Name (Last, First, Middle Initial)								
B. Sparks, Lydia, , ,				Date of Disb	ursement			
Mailing Address 320 Channing Way, Apt 132	Mailing Address 320 Channing Way, Apt 132							
City San Rafael	State Zip Code CA 94903-2622			FEC Identification Number				
Purpose of Disbursement				C				
Refund					ion ID : B24625375AC			
Candidate Name	Category/ Type se Disbursement For:			Amount of Each Disbursement this Perio				
Office Sought: House Disburse								
Senate Sought.	Primary	General		4	50.00			
President	Other (spec	cify)		am.				
State: District:	l			Memo Ite	=111			
Full Name (Last, First, Middle Initial)				5				
C. Yahraus, Dulcy, , ,					Date of Disbursement			
Mailing Address 1005 Villagio Cir Unit 207	07 05 7 2017							
	State	Zip Code		FF0 11 11"				
Sarasota	asota FL 34237-3679				ation Number			
Purpose of Disbursement Refund								
Candidate Name	Namo				tion ID : B4889B0180			
Candidate Name			Category/ Type	Amount of Ea	ach Disbursement this Period			
Office Sought: House Disburse	.,,,,,		25.00					
Senate				4	45 45			
President	Other (spec	cify) 🔻		Memo Ite	em			
State: District:								
SUBTOTAL of Disbursements This Page (optional)					160.00			
<u> </u>					200			
TOTAL This Period (last page this line number only	·)				360.00			